Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

F-5235 CIPDIV

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			73					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	/-> minus 20=		*			X\$ 9=		OR	X\$18=		
<u> </u>	EPENDENT CL) minus 3 =		*			X40=		OR	X80=		
MU	LTIPLE DEPEN	ESENT 					+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2		TOTAL		OR	TOTAL	210-	
Claims as amended - Part II								CDOALLE		~	OTHER SMALL		
		(Column 1)	(Colui					SMALL E		OR	SWALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	CLAIM	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
								TOTAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEE [] ,	ADDIT. FEE		
		CLAIMS		HIGH	EST	<u>(Coldini 3)</u>	ה' ר	<u> </u>	ADDI-] [ADDI-	
AMENDMENT B	1	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	CLAINA	=	╣╢	X40=		OR	X80=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	-	OR	+270=		
							<u>[</u>	TOTAL ADDIT. FEE			TOTAL		
(Column 1) (Column 2) (Column 3)										1011	ADDIT. FEE		
	, 	CLAIMS]	HIGH	EST	(Column S)	ה		A D D L	ſ	<u> </u>	4001	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	╢╟	X40=		i	X80=		
	FIRST PRESE] }	+135=		OR								
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270≈		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE		
		ber Previously Paid					er fou	nd in the app	ropriate box	in col	umn 1.		